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APPLICANTS

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** CONTINUING DATA ***** *None*

** FOREIGN APPLICATIONS ***** *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 01/28/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and <i>A.R.</i> Acknowledged <i>A.R.</i>	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>A.R.</i> Examiner's Signature Initials	STATE OR COUNTRY CA	SHEETS DRAWING 17	TOTAL CLAIMS 48	INDEPENDENT CLAIMS 5
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TITLE

Electrosurgical jaw structure for controlled energy delivery

FILING FEE RECEIVED 706	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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